



## FAIRFAX COUNTY PARK AUTHORITY



# Adventure Camp Packet

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Please check the outside mailing label to be sure your child is in the correct camp. Copies of all forms are available online at [www.fairfaxcounty.gov/parks/campforms](http://www.fairfaxcounty.gov/parks/campforms) and click on the School-Based Adventure Camps link.

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**\*\*\*DO NOT MAIL FORMS IN -- BRING FORMS TO FIRST DAY OF CAMP\*\*\***

### Welcome to Adventure Camp!

This packet includes forms parents must sign and bring to camp on the first day. It also includes important schedule information. Please read the entire packet carefully. You will be required to submit all of the forms on the first day of camp. If you lose the forms, they can be acquired on line at [www.fairfaxcounty.gov/parks/campforms](http://www.fairfaxcounty.gov/parks/campforms). THE FOLLOWING FORMS MUST BE FILLED OUT COMPLETELY IN ORDER FOR YOUR CHILD TO PARTICIPATE IN THE ACTIVITIES:

Children's Emergency and Medical Information

Pick Up Authorization

Rules of Conduct

Theme Park Permission

River Riders Waiver

River & Trails Waiver

Adventure Links Waiver

### Transportation

Fairfax County Park Authority (FCPA) uses Fairfax County Public School buses and trained drivers for Adventure Camp. We will be shuttling between two pick up sites with each bus. **Please note that there may be other school buses being used for other programs in proximity to our bus; therefore, it is extremely important that the camper does not get on a bus until he/she has been instructed to do so by the counselor.** Look for Adventure Camp staff by the flagpole at your school site. For updated bus information, call the Adventure Camp Hotline at (703)324-8410

### Staff and Activities

Each bus has two trained Fairfax County Park Authority staff members, many of whom are teachers and experienced outdoorspersons with years of experience working with youth. These counselors supervise the trip from start to finish, and generally handle discipline issues and provide encouragement and support for each camper. In addition to our staff: for rock climbing, kayaking, white water rafting and tubing professionals who specialize in each activity area will provide instruction.

## POLICIES

### Rain / Inclement Weather

It is unlikely that the weather will necessitate the cancellation of a scheduled activity. Often it can be raining here in Northern Virginia but weather at our destination site is fine. However, if a scheduled activity is jeopardized by inclement weather, the camp will still operate with a substitute activity.

### Emergency Medication

Epi-Pens and Inhalers may accompany your child to camp as long as a physician completes the proper medical authorization. Without this form, you will not be permitted to leave these emergency medications at camp. Please call (703) 324-8683 for the Authorization for Inhaler or Epi-Pen or go to our website at [www.fairfaxcounty.gov/parks/campforms](http://www.fairfaxcounty.gov/parks/campforms) to obtain these forms.

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### Sick Children

If a child arrives with symptoms of illness, the child will not be permitted to stay. Parents will be called if a child becomes ill during the trip to arrange for pickup. Parents will be notified if child has a temperature over 100 degrees or shows symptoms of a communicable disease. If a child has symptoms of a communicable disease, a doctor's note is required before children may return to camp. Please contact the Youth Services Office at (703)324-8683 if your child will miss camp.

### Behavior Management and Disciplinary Actions

If a child brings a weapon, alcohol or drugs to camp, intentionally harms others, vandalizes property, or displays other extreme behavior, he/she will be dismissed from the program and no refund will be given. As Adventure Camp involves specific safety and behavior requirements for each activity, it is essential that campers follow the directions of instructors and FCPA staff. FCPA reserves the right to terminate a child's enrollment.

All participants enrolled in FCPA programs must meet the code of conduct which states children must be able to demonstrate the following with minimal direction: (1) must be able to maintain personal care without staff support; (2) stay with assigned group; (3) respect others; (4) maintain self control (listening, following directions, keeping hands to oneself, using appropriate language); (5) meet the prerequisite skills for the program if required. When a camper exhibits inappropriate behavior, parents will be notified verbally and/or in writing with notification of further action.

### Sunscreen & Lotion Application

Staff are not permitted to apply sunscreens or lotions to children, however campers should bring sunscreen and apply it regularly themselves.

### Reporting Child Abuse & Neglect

If it is suspected that a child has been abused, neglected, or exploited in any way, program staff is required to report this to the Youth Services Director who will immediately make a report to Child Protective Services. Confidentiality will be maintained.

### Refunds/Transfers

Cancellations and transfers may NOT be done through the automated telephone or internet registration systems. For operator assistance, call (703) 222-4664. There are no refunds for missed days due to changed work or vacation schedules, sick days, or other non-emergency reasons. Refunds and transfers must be requested at least ten business days prior to the camp session for which the refund/transfer is being requested. All but \$25 will be returned for approved refunds. Refunds are not permitted for those who register within ten business days prior to the start of a camp session. Transfers cannot be done within the ten business day period before the start of camp. Within the ten business days of the start of camp, refunds will be given only for medical emergencies with doctor's written verification as long as the verification is received BEFORE the camp begins. If a medical emergency occurs during camp, a doctor's written verification will be needed within 24 hours for a pro-rated refund. Requests received after the camp session ends will not be granted.

### What to Bring

Please see the attached detailed list of what to bring for each day of camp. Be sure to label all personal belongings and keep them in a backpack or other durable bag. Items may be left on the bus during the activity, but FCPA staff is not responsible for lost or stolen items. Valuable items such as personal electronics and jewelry should be left at home. Participants must bring their own food and beverage in an individual lunch size container. Campers may want to bring money for stops at convenience stores for snacks.

## **Preparing for the First Day of Camp**

**\*\*NOTE:** The Hayfield bus will pick up at Hayfield Secondary School (NOT Hayfield Elementary School)

Please read all of the materials that have been sent to you, fill-out, **SIGN** and bring each permission form to your adventure camp counselor on the first day of your camp session.

**On the first day, PARENTS MUST WAIT UNTIL THEIR CHILD IS COMPLETELY CHECKED IN BY A COUNSELOR--** incomplete forms may prevent your child from participating!

### **➔ MORNING DROP-OFF**

**Campers must arrive promptly** at their drop-off sites. The buses will leave the drop-off sites each morning on schedule. If you arrive late and the bus has left, do not leave your child unattended, as no staff will be on site. Due to time constraints, we cannot hold the bus at the next pickup site or along the road. Parents may drive directly to the destination if the camper misses the bus. For directions or more information, please call Youth Services at (703) 324-8683. Remember most sites meet at the flagpole.

Parents must sign their child in each day.

### **➔ AFTERNOON PICKUP**

#### **Signing Out**

For the safety of your children, authorized individuals 18 years or older must sign the child out each day. Staff is required to ask for I.D. for all persons picking up children. Children will not be released to anyone not on the Pick Up Authorization Form. Custody issues require special attention; please call Youth Services at (703)324-8683. Written permission must be given to the counselors if your child will be walking to and from camp. Be sure your car is parked legally during this process.

#### **Late Parent Policy**

If a parent or authorized person is late in picking the child up, a late fee of \$5 for every 15 minutes will be applied. If a child is consistently picked up late, the child may be dismissed from the program. If you will be more than a few minutes late, please contact (703)324-8683 to let the administrative staff know. They will contact the counselors on the bus by cell phone. A staff member will remain with the child up to one hour after the program ends. After one hour Child Protective Services will be called. **STAFF IS NEVER ALLOWED TO TRANSPORT CHILDREN HOME!**

#### **Adventure Camp Hotline**

On occasion, due to traffic, weather and the length of time it takes to complete each activity, our buses may arrive at pickup sites later than scheduled. Each bus is in contact with FCPA headquarters by cell phone and if we know the bus will arrive more than a few minutes late, a recorded message with the estimated return time will be placed on **the Adventure Camp Hotline at (703)324-8410**. Please call this number **AFTER 3:30pm**, and before you leave to pick your child up each day in case the buses are running behind schedule. Hopefully, this will avoid having parents wait in their cars for long periods.



**Accommodations:** If participation accommodations and/or alternative information formats are needed in accordance with the Americans with Disabilities Act, please call (703) 324-8563 at least 10 business days in advance of the date needed. TTY (703) 803-3354.

## **What to Bring to Adventure Camp**

(bus stops at convenient stores or restaurants daily, before and after the activity, *if time permits*)

### **WATER ACTIVITIES:**

- Bring Sunscreen
- Wear old sneakers (no socks) or sandals (Teva style) that wrap around the ankle (this prevents the sandals from coming off your feet in the water).
- Bring a change of clothes – **You will get wet!**
- **Kayaking-** bring a lunch in a LARGE ZIP-LOCK BAG OR SOFT COLLAPSIBLE COOLER ONLY! Other coolers will not fit behind the kayak seat. Bring a sports bottle with **water**.
- **Rafting-** bring lunch in a PAPER OR PLASTIC BAG ONLY! This bag will be put in a waterproof container once we get to the rafting location, be sure to put your name on the bag. Bags will be thrown away after lunch; **DO NOT bring anything you want to keep**. The rafting company will provide drinks. You may bring a drink but it must be in a disposable (not glass) container.
- **Tubing-** bring lunch in a large zip-lock bag or collapsible cooler, be sure to put your name on the bag.
- NO SODAS PLEASE (due to dehydration)

### **ROCK CLIMBING ACTIVITIES:**

- **Bring PLENTY OF WATER!** At least two sports bottles. **NO SODAS!**
- Bring a lunch in a cooler or insulated bag
- Bring a backpack to carry belongings. Make sure camper's name is visible.
- Bring sunscreen and bug spray
- **NO SHORT SHORTS! Shorts must be no more than 5 inches above the knee.** This is so the harness won't cut into the legs.
- Wear old clothes and comfortable (old) **sneakers-must be closed toe (no sandals)**

### **THEME PARKS:**

- Bring sunscreen
- Wear casual clothes, but remember **it's going to be hot!**
- Bring a swimsuit and towel if you want to use the water park on Six Flags and Kings Dominion days
- Lunch/Drink:  
Kings Dominion – usually allows you to bring your own lunch. Campers have to carry it with them all day  
Six Flags/Splash Down – these parks do NOT allow you to bring in food/drink (water is ok). You must purchase food at the park. Park Security checks bags at the gate and confiscates any food before it enters the park.

**Don't forget to complete the proper forms if your child must carry an epi-pen or inhaler or takes medications. Forms are available on the website at [www.fairfaxcounty.gov/parks/campforms](http://www.fairfaxcounty.gov/parks/campforms)**

# ADVENTURE CAMP SCHEDULE 2006

DATES		Falls Church HS 7:30am-4:30pm	Chantilly HS 8am-4pm			Hayfield SEC 7:30am-4:30pm	Robinson SEC 8am-4pm
	Adventure Fun				Adventure Fun		
6/26-6/30	Monday:	Kayaking	Harpers Ferry, WV		Monday:	Rafting	Knoxville, MD
	Tuesday:	Rafting	Knoxville, MD		Tuesday:	Rock Climbing	Purcellville, VA
	Wednesday:	Kings Dominion	Doswell, VA		Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Rock Climbing	Purcellville, VA		Thursday:	Kayaking	Harpers Ferry, WV
	Friday:	Six Flags	Largo, MD		Friday:	Six Flags	Largo, MD
7/10-7/14		Madison HS 7:30am-4:30pm	Centreville HS 8am-4pm			West Sprgfld HS 7:30am-4:30pm	Oakton HS 8am-4pm
	Monday:	Kayaking	Harpers Ferry, WV		Monday:	Rafting	Knoxville, MD
	Tuesday:	Rafting	Knoxville, MD		Tuesday:	Rock Climbing	Purcellville, VA
	Wednesday:	Kings Dominion	Doswell, VA		Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Rock Climbing	Purcellville, VA		Thursday:	Kayaking	Harpers Ferry, WV
	Friday:	Six Flags	Largo, MD		Friday:	Six Flags	Largo, MD
7/17-7/21		Falls Church HS 7:30am-4:30pm	Chantilly HS 8am-4pm			Hayfield SEC 7:30am-4:30pm	Robinson SEC 8am-4pm
	Monday:	Kayaking	Harpers Ferry, WV		Monday:	Tubing	Harpers Ferry, WV
	Tuesday:	Rafting	Knoxville, MD		Tuesday:	Rafting	Knoxville, MD
	Wednesday:	Kings Dominion	Doswell, VA		Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Tubing	Harpers Ferry, WV		Thursday:	Kayaking	Harpers Ferry, WV
	Friday:	Splash Down	Manassas, VA		Friday:	Splash Down	Manassas, VA
7/24-7/28		Madison HS 7:30am-4:30pm	Centreville HS 8am-4pm			West Sprgfld HS 7:30am-4:30pm	Oakton HS 8am-4pm
	Monday:	Kayaking	Harpers Ferry, WV		Monday:	Rafting	Knoxville, MD
	Tuesday:	Rafting	Knoxville, MD		Tuesday:	Rock Climbing	Purcellville, VA
	Wednesday:	Kings Dominion	Doswell, VA		Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Rock Climbing	Purcellville, VA		Thursday:	Kayaking	Harpers Ferry, WV
	Friday:	Six Flags	Largo, MD		Friday:	Six Flags	Largo, MD

\*\*\*\*Wednesdays: Kings Dominion Day- return times are 5:30pm and 6:00pm

more dates on back

DATES		Falls Church HS	Chantilly HS
Adventure Fun		7:30am-4:30pm	8am-4pm
7/31-8/4	Monday:	Kayaking	Harpers Ferry, WV
	Tuesday:	Rafting	Knoxville, MD
	Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Rock Climbing	Purcellville, VA
	Friday:	Six Flags	Largo, MD

		Hayfield SEC	Robinson SEC
Adventure Fun		7:30am-4:30pm	8am-4pm
	Monday:	Rafting	Knoxville, MD
	Tuesday:	Rock Climbing	Purcellville, VA
	Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Kayaking	Harpers Ferry, WV
	Friday:	Six Flags	Largo, MD

		Madison HS	Centreville HS
Adventure Water		7:30am-4:30pm	8am-4pm
8/7-8/11	Monday:	Kayaking	Harpers Ferry, WV
	Tuesday:	Rafting	Knoxville, MD
	Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Tubing	Harpers Ferry, WV
	Friday:	Splash Down	Manassas, VA

		West Sprgfld HS	Oakton HS
Adventure Water		7:30am-4:30pm	8am-4pm
	Monday:	Tubing	Harpers Ferry, WV
	Tuesday:	Rafting	Knoxville, MD
	Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Kayaking	Harpers Ferry, WV
	Friday:	Splash Down	Manassas, VA

		Falls Church HS	Chantilly HS
Adventure Fun		7:30am-4:30pm	8am-4pm
8/14-8/18	Monday:	Kayaking	Harpers Ferry, WV
	Tuesday:	Rafting	Knoxville, MD
	Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Rock Climbing	Purcellville, VA
	Friday:	Six Flags	Largo, MD

		Hayfield SEC	Robinson SEC
Adventure Fun		7:30am-4:30pm	8am-4pm
	Monday:	Rafting	Knoxville, MD
	Tuesday:	Rock Climbing	Purcellville, VA
	Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Kayaking	Harpers Ferry, WV
	Friday:	Six Flags	Largo, MD

		West Sprgfld HS	Chantilly HS
Adventure Water		7:30am-4:30pm	8am-4pm
8/21-8/25	Monday:	Kayaking	Harpers Ferry, WV
	Tuesday:	Rafting	Knoxville, MD
	Wednesday:	Kings Dominion	Doswell, VA
	Thursday:	Tubing	Harpers Ferry, WV
	Friday:	Splash Down	Manassas, VA

Due to traffic, return times vary, please call the hotline for updates

ADVENTURE CAMP HOTLINE  
(703) 324-8410

\*\*\*\*Wednesdays: Kings Dominion Day- return times change  
from 4pm to 5:30pm and 4:30pm to 6pm

**Fairfax County Park Authority**  
**Children's Emergency and Medical Information**



Child's Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Male \_\_\_\_\_ Female  
Last First MI

Address: \_\_\_\_\_  
Street City State Zip

Phone (h): \_\_\_\_\_ Child's Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ E-Mail \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_  
Street (if different from child's) City State Zip

Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ E-Mail \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_  
Street (if different from child's) City State Zip

Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

**\*\*Mandatory 2 Emergency Contacts other than parents (required by the VA Dept of Social Services)**

Emergency Contact #1 \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Address \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Emergency Contact #2 \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Address \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Child's Physician (name & phone) \_\_\_\_\_

Insurance Company (name & policy #) \_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No Is your child under physician's care or taking medications on a continuing basis? If yes, please explain what for.  
\_\_\_\_ Yes \_\_\_\_ No Does your child have a contagious disease? If yes, please describe. \_\_\_\_\_  
\_\_\_\_ Yes \_\_\_\_ No Does your child have any allergies? If yes, please specify allergies. \_\_\_\_\_  
What should be done if your child comes into contact with an allergen? \_\_\_\_\_  
\_\_\_\_ Yes \_\_\_\_ No Does your child have any chronic problems, special needs, or other conditions we should know about? If yes, please call (703) 324-8563 to report condition. What condition, please explain: \_\_\_\_\_  
\_\_\_\_ Yes \_\_\_\_ No Does your child take medications? If yes, please list. If during camp, you must contact Youth Services for proper medical authorization forms.  
\_\_\_\_ Yes \_\_\_\_ No Is your child allowed to participate in swimming/wading activities if included in the program?

What is your child's swimming ability: \_\_\_\_ Non-Swimmer \_\_\_\_ Beginner Swimmer \_\_\_\_ Experienced Swimmer

What schools or other programs does your child attend? \_\_\_\_\_

I hereby authorize the FCPA and/or designated contractor to seek medical treatment for my child, at the nearest facility, in the event medical care is required. In the event non-emergency medical care is required, I authorize the FCPA to seek medical treatment through my child's physician. I understand that I am responsible for medical expenses incurred by my child and that FCPA advises that I carry health insurance for my child. I have read the policies for the program and agree to adhere to them, including the policy if my child becomes ill, I must pick up my child immediately. I certify that the above information is complete and correct.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

**DO NOT MAIL THIS FORM. PLEASE BRING TO CAMP ON FIRST DAY.**





**Fairfax County Park Authority**  
**Pick Up Authorization**  
(for School & Vendor/Business Based Camps)



**Child's Name:**

**Camps Child is Enrolled in:**

The following people are authorized to pick up my child from the FCPA program. I understand my child will be allowed to leave with these individuals only. Photo identification will be asked at sign out. (please include yourself)

Authorized Person's Name (please print)	Relationship to Child	Phone Number

Name of persons NOT allowed to pick up child (appropriate custody papers shall be attached if a parent is not allowed to pick up the child):

Date	Day	Time In	Parent/Guardian Initials	Time Out	Parent/Guardian Initials
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday				

Parent/Guardian Signature\_\_\_\_\_ Date\_\_\_\_\_

**DO NOT MAIL THIS FORM. PLEASE BRING TO CAMP ON THE FIRST DAY.**



**Fairfax County Park Authority**  
**Camp Program**  
**Rules of Conduct**  
**Adventure Camp**



Children and parents should review this together and sign below. This document is a requirement for camp enrollment.

**Children must:**

- ☺ Maintain personal care (toileting, changing) without staff support
- ☺ Stay with assigned group
- ☺ Respect others in what you say and do
- ☺ Listen to program leaders and follow directions
- ☺ Use appropriate language (foul language will require further action)
- ☺ Follow all rules when riding on the bus including staying in one's seat
- ☺ Keep hands to oneself and maintain self control
- ☺ Take care of their own belongings
- ☺ Use equipment and supplies in a safe and appropriate manner
- ☺ Report teasing and bullying immediately to camp staff. Teasing and bullying are not tolerated and are grounds for enrollment termination.
- ☺ Play safe and have fun

**Parents must:**

- Complete and submit appropriate paperwork from the parent packet
- Sign children in and out of the program and bring proper I.D.
- Be on time to drop off and pick up children
- Assist staff in resolving behavior issues
- Contact camp staff immediately when issues arise

**Grounds for Immediate Dismissal (no refund given):**

- A parent who refuses to follow FCPA policies as stated in the parent packet
- A child who brings a weapon, alcohol or drugs to camp
- A child who intentionally harms himself or causes injury to another child or staff member
- A child who vandalizes the property of the camp facility, staff or other children
- A child who steals items from the camp facility, staff or other children
- A child who displays inappropriate behaviors repeatedly
- A child who fails to comply with the Rules of Conduct

We have read and understand the rules of conduct and agree to uphold them to maintain a safe and enjoyable camp experience for everyone.

Child's Name (please print) \_\_\_\_\_

Signature of Child \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

## Management of Behavior

From time to time, staff must take actions to resolve a problem that is disruptive to the program and other participants. Behavior guidance requires very specialized skills and although staff are not behavior specialists, staff are trained to provide basic behavior interventions. In the management of disruptive and inappropriate behaviors, staff will use the following techniques:

- √ Acknowledge the behavior and address it with the child
- √ Assess the reasons for the behavior
- √ Discuss with the child what is appropriate behavior
- √ Redirect or ignore behaviors when appropriate
- √ Model appropriate behaviors
- √ If necessary, remove the child from the activity until the child can exhibit self control
- √ Discuss the behavior problems with the parent(s) and strategize with them possible solutions

In situations where inappropriate or disruptive behavior is reoccurring, it is possible for the child's enrollment in the program to be terminated.

The staff does NOT use physical punishment or restraints, humiliation or shaming, or denial of food as methods to manage behavior.

The FCPA appreciates your support. Staff uses a proactive approach to meet the needs of the children by planning age and ability appropriate activities that provide a fun and safe recreational program.



**Accommodations:** If participation accommodations and/or alternative information formats are needed in accordance with the Americans with Disabilities Act, please call (703) 324-8563 at least 10 business days in advance of the date needed. TTY (703) 803-3354.



**INDEMNIFICATION AND  
ACKNOWLEDGMENT OF RISK FOR MINORS**

(Must be completed by parent or legal guardian for participants under the age of 18)

**Adventure Links**

21498 Blue Ridge Mountain Road

Paris, VA 20130

[www.adventurelinks.net](http://www.adventurelinks.net) 800-877-0954 540-592-3682 Fax: 540-592-3316

I acknowledge that my child's participation in outdoor activities such as rock climbing, hiking, challenge course activities, caving and whitewater canoe and kayak trips entails known and unanticipated risks which could result in physical or emotional injury, paralysis, death, or damage to my child. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

In consideration of \_\_\_\_\_ (print minor's name) ("Minor") being permitted by VASPAC, Inc. (dba Adventure Links) to participate in its activities and to use its equipment and facilities, I agree to indemnify and hold harmless VASPAC, Inc. (dba Adventure Links) from any and all claims, demands, or causes of action which are brought by myself, and/or the minor and/or on behalf of the Minor against VASPAC, Inc. (dba Adventure Links) or and which are in any way connected with such use or participation by Minor. In the event that I file a lawsuit against VASPAC, Inc. (dba Adventure Links), I agree to do so solely in the state of Virginia, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

I hereby represent that the minor is in good health, that there are no special problems associated with the care of the minor, and that I have adequately informed VASPAC, Inc. (dba Adventure Links) personnel of any special instructions regarding the minor. I certify that I have adequate insurance to cover any injury or damage the minor may suffer while participating, or else I agree to bear the costs of such injury or damage myself.

I authorize VASPAC, Inc. (dba Adventure Links) personnel to call for medical care for the minor or to transport the minor to a medical facility or hospital if, in the opinion of such personnel, medical attention is needed by the minor. I further authorize appropriate personnel to render such medical treatment as is necessary for the health of the minor, in their professional opinion. I agree that once the minor is in the care of medical personnel or a medical facility, VASPAC, Inc. (dba Adventure Links) shall have no further responsibility for the minor and I agree to pay all costs associated with such medical care and transportation.

I authorize VASPAC, Inc (dba Adventure Links) personnel to use photographs, video footage, and quotes acquired during the program for promotional purposes. I further understand that upon my child's participation in this program, I allow Adventure Links to forward further program information or updates of services. I must Adventure Links in writing if I do not wish to receive this information.

Parent or Guardian Name: \_\_\_\_\_

Child's Name : \_\_\_\_\_

Address: \_\_\_\_\_

Phone (H): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (W) : \_\_\_\_\_

Email: \_\_\_\_\_

Phone (Cell): \_\_\_\_\_

Program: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

The Venue of any dispute that may arise out of this agreement or otherwise between the parties to which the VASPAC, Inc. (dba Adventure Links) or its agents is a party shall be either the town of Berryville, Virginia, Justice Court or State Supreme Court in Virginia. ©- 2001 Adventure Links-- W2new-1/2002



**River & Trail Outfitters**

## *White Water Rafting*

### PARENT/GUARDIAN PERMISSION FORM

(This form to be used for minors only)

I hereby grant permission for my child, \_\_\_\_\_, to participate in whitewater rafting, kayaking, canoeing, tubing, biking, camping, climbing on a portable rock climbing wall and hiking or cross country skiing, with River & Trail Outfitters Inc. And I hereby agree as follows:

I fully understand and acknowledge that: (a) risks and dangers exist in my child's use of rafting, kayaking, canoeing, tubing, biking, camping, climbing on a portable rock climbing wall and hiking or cross country skiing equipment and my child's participation in rafting, kayaking, canoeing, tubing, biking, camping, climbing on a portable rock climbing wall and hiking or cross country skiing activities; (b) my child's participation in such activities and/or use of such equipment may result in injury or illness or death or damage to personal property (c) these risks and dangers may be caused by other participants, or by accidents, or by the forces of nature or other causes. Risks and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, selection of trail or river route, water level, weather conditions, risks of falling out of, from, or during a raft, kayak, canoe, tube, bike, portable rock climbing wall, hiking or cross country skiing and such other risks, hazards and dangers that are integral to recreational activities that take place in a wilderness, outdoor or recreational environment; and (d) I hereby accept and assume these risks and dangers.

I have been advised that my child must wear an approved personal flotation device at all times while on the water. I affirm that my child will not be under the influence of alcohol or controlled substance, and will not carry, use, or consume these substances before or during his/her scheduled activities. Any claims or dispute arising from my child's participation in River & Trail Outfitters' activities or use of River & Trail Outfitter's equipment shall be venued in the Washington County District Court for the State of Maryland.

My child is in good health and is at or above the minimum age stated in River & Trail Outfitter's advertising for each activity in which he/she will participate. I understand that strenuous physical exertion may be required and my child has no known physical disabilities or health problems, which will present any risk to his/her participation in the activities. Information on my child's physical handicaps or medical problems which I feel River & Trail Outfitters should know about will be given in writing in advance of the scheduled trip. I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, even if arising from the negligence of the releasees, to the fullest extent permitted by law. Furthermore, I permit the use of any photos, slides, films, or sketches, of him/her taken during the day's activities for publicity, advertising, promotion or other commercial purpose. The above agreement shall be binding on my heirs, successors, assigns, administrators and executors.

I HAVE READ THE ABOVE AND BY SIGNING IT AGREE. IT IS MY INTENTION TO GRANT PERMISSION FOR MY CHILD TO PARTICIPATE IN RIVER & TRAIL OUTFITTER'S RAFTING, KAYAKING, CANOEING, TUBING, BIKING, CAMPING, PORTABLE ROCK CLIMBING WALL AND HIKING OR CROSS COUNTRY SKIING ACTIVITIES, AND TO ASSUME AND ACCEPT ALL RISKS ASSOCIATED THEREWITH.

Group Name (if applicable) \_\_\_\_\_

Parents Name (Print) \_\_\_\_\_ Signature \_\_\_\_\_

Street and Apt. Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Trip Date: \_\_\_\_\_

Child's Signature: \_\_\_\_\_

DO NOT LOSE—PLEASE GIVE COMPLETED FORM TO YOUR GROUP LEADER

# PARENT AND GUARDIAN RELEASE, ASSUMPTION OF RISK and INDEMNITY AGREEMENT

**I understand that these activities and services pose substantial risks of injury or death** and damage or loss of personal property as the result of exposure; travel on or being in whitewater rivers and streams; travel on roads or rough terrain by foot, conveyances, or other means while participating in activities or using services; the negligence, gross negligence, or bad judgment of the child, River Riders, Inc., or other participants; the failure or misuse of equipment; the risk that injuries may occur in remote areas without adequate medical or other services; and other known and foreseeable risks of these activities and services. I represent that the minor child is in good physical condition and health and is able to safely participate in these activities and is at or above the minimum age required by River Riders, Inc., for the activity in which the minor child will participate.

For myself and on behalf of the minor child and in consideration of and as partial payment for the minor child being allowed to participate in activities and use services provided by River Riders, Inc., I ASSUME, to the greatest extent permitted by law, all of the risks, whether or not specifically identified herein, of all the activities in which the minor child will participate and services which the minor child will use; I RELEASE River Riders, Inc., from any and all liability, including, but not limited to, liability arising from negligence, gross negligence, willful and wanton and intentional conduct; and I WILL INDEMNIFY AND HOLD HARMLESS River Riders, Inc., from any and all costs, claims, and liability, of every kind and nature whatsoever, arising, directly or indirectly, from the participation by the minor child in activities or use of services, including legal costs and expenses, and for the costs of any medical or other expenses incurred for the benefit of the minor child.

For myself and on behalf of the minor child, I agree that the exclusive venue of any suit against River Riders, Inc., for any reason shall be the Circuit Court of Jefferson County, West Virginia; consent to the jurisdiction of that Court as to any action against me or the minor child to enforce this Agreement; agree that this Agreement is to be interpreted under the laws of the State of West Virginia and/or Maryland which gives it the broadest interpretation and application; and agree that if any part of this Agreement is found to be invalid that all other portions shall be fully enforced.

- (1) Participants have a duty to act as would a reasonably prudent person when engaging in recreational activities offered by commercial whitewater outfitters and commercial whitewater guides in this state.

- (2) No participant may:
  - (1) Board upon or embark upon any commercial whitewater expedition when intoxicated or under the influence of nonintoxicating beer, intoxicating beverages or controlled substances; or
  - (2) Fail to advise the trip leader or the trip guide of any known health problems or medical disability and any prescribed medication that may be used in the treatment of such health problems during the course of the commercial whitewater expedition; or
- (3) Engage in harmful conduct or willfully or negligently engage in any type of conduct which contributes to or causes injury to any person or personal property; or
- (4) Perform any act which interferes with the safe running and operation of the expedition, including failure to use safety equipment provided by the commercial whitewater outfitter or failure to follow the instructions of the trip leader or trip guide in regard to the safety measures and conduct requested of the participants; or
- (5) Fail to inform or notify the trip guide or trip leader of any incident or accident involving personal injury or illness experienced during the course of any commercial whitewater expedition. If such injury or illness occurs, the participant shall leave personal identification, including name and address, with the commercial whitewater outfitter's agent or employee.

[illegible][illegible]

	<b>Minor Child's Signature</b>	<b>Minor Child's Birthday (MMDDYYYY)</b>
<b>Minor Child's Name (Please Print Neatly)</b>		



## Fairfax County Park Authority Theme Park / Water Park Permission Form



Due to the nature of the activities at theme and water parks, including the controlled environment and the need to move through lines in small groups, participants are not required to stay with the entire group or a FCPA counselor during their time at the park. We have had many years of successful programs using this method that allows participants freedom to choose their favorite activities. In order to ensure the safety of the campers, the FCPA has established the following guidelines for Adventure Camp theme and water park trips:

- Groups consist of three or more children who must stay together.
- Groups must check-in at the designated meeting place at certain intervals during the day as outlined by the camp staff.
- Campers must stay in the park at all times.
- Camp staff will move throughout the park with different groups throughout the day to assist campers.
- A staff member will be at the designated meeting place every hour on the hour in case a camper needs assistance. Park staff will be able to contact our staff at these designated locations and times.
- Campers are given wristbands with their group name and an emergency phone number.
- Staff will coordinate with the park's emergency personnel to arrange communications throughout the day.
- Campers are responsible for meeting at the designated place AND time for check-ins. Waiting in line is not an acceptable excuse for being late. In fairness to other campers and parents waiting back at home, campers who are late or who misuse our trust may be required to stay with a counselor for all or part of theme park days at the discretion of FCPA staff.
- Campers who elect to participate in water rides, water park activities or go swimming do so at their own risk under the supervision of theme park staff and lifeguards only.
- Should a participant ignore instructions and not return in time for the return trip, a counselor will stay on site, but the bus may leave to return home. In this case, the parent is responsible for coming to the activity site and providing return transportation for their child.

Child's Name \_\_\_\_\_

I understand the above guidelines and agree to discuss these with my child prior to camp.

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Parent's Name (print)

Signature

Date

01/05